

**Provider Inspection Summary**  
For the period 07/01/2003 to 06/30/2006  
Adult Family Home

**Facility Information**

**Facility Name:** BENNETT HOME (THE) (190042)  
**Address:** 4533 E PIC A DILLY DR, JANESVILLE, WI 53546  
**License Status:** REGULAR  
**Licensed/Certified/Registered** 06/30/1996  
**Regional Office:** SOUTHERN REGION (MADISON), (608) 243-2370

**Survey History**

**Survey ID:** 0097321      **End Date:** 06/19/2006      **Type:** STANDARD      **Purpose:** SURVEY/COMPLAINT

**Results:** ENFORCEMENT ACTION

**Statement of Deficiency:** #10008386    Served 07/21/2006

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.05(2)(a)	DIFFICULTY WALKING		

**Survey ID:** 0094572      **End Date:** 04/07/2005      **Type:** STANDARD      **Purpose:** SURVEY

**Results:** ENFORCEMENT ACTION

**Statement of Deficiency:** #10008150    Served 04/20/2005

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
50.065(2)(b)intro	ENTITY BACKGROUND CHECK REQUIREMENTS		
88.04(2)(h)	COMPLY WITH OSHA		
88.05(2)(a)	DIFFICULTY WALKING		

*Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.*

**Provider Inspection Summary**  
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Adult Family Home

Enforcement History
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<b>Date: 04/15/2005</b>	<b>SOD #10008150</b>	<b>Appealed: No</b>
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Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION  
COMPLY WITH REQUIREMENT

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**Provider Inspection Summary**  
For the period 07/01/2003 to 06/30/2006  
Adult Family Home

<b>Complaint History</b>
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**Date Complaint Received: 10/27/2005**

**Date Investigation Completed: 06/19/2006**

Subject Area(s)

RESIDENT RIGHTS  
PROGRAM SERVICES

Result

NOT SUBSTANTIATED  
NOT SUBSTANTIATED

SOD #

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